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Roster of Editorial Board appears in this issue at beginning of California Medical Association department. (For page number of C. M. A. department, see index below.)

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Leaflet Regarding Rules of Publication.—CALIFORNIA AND WESTERN MEDICINE has prepared a leaflet explaining its rules regarding publication. This leaflet gives suggestions on the preparation of manuscripts and of illustrations. It is suggested that contributors to this Journal write to its offices requesting a copy of this leaflet.

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EDITORIALS

ON DEVELOPMENTS IN MATERNITY-PEDI- ATRIC (E.M.I.C.) PROGRAM OF FEDERAL CHILDREN'S BUREAU

County Medical Societies to Appoint Local Committees.—The central C.M.A. Committee on Maternity-Pediatric Work (Karl L. Schaupp, Chairman) under date of August 31st, sent a letter to the county medical societies in California, suggesting the appointment of local committees on E.M.I.C. activities. A copy of the letter and its addendum, "Recent Rulings of E.M.I.C. on C.M.A. Suggestions," appears in this issue on page 160.

* * *

Explanatory Comments on the Addendum.

It may be in order to add further comment concerning the addendum, where numerical references correspond to those below.

1. Because some patients coming under the E.M.I.C. program are able and willing to pay a physician whom they select, a supplementary fee, that is, a fee in addition to the \$50.00 E.M.I.C. allocation (it to be stated in the contract signed by the physician that the patient is able and willing to pay a supplemental fee, the exact amount also being stated), the California Committee deemed it in order to suggest that a supplemental fee, under such stipulation, be permitted.

The officials of the Federal Children's Bureau disapproved the above request.

In passing, it may be stated that the \$50.00 fee insisted upon by the California Committee (instead of the \$35.00 and lower fees originally suggested by the Federal Children's Bureau representatives) has now become operative, practically in all States of the Union. The profession throughout the country can thank California for that service.

Because the \$50.00 fee does not, in places, cover California costs, it seemed fair to suggest that supplemental fees, as above safeguarded, be sanctioned. However, the Federal Children's Bureau disapproves and there the matter rests; presumably, perhaps, because in some sections of the United States, a \$50.00 fee is deemed sufficient. Many California physicians are required, therefore, to make donation in part, of their professional services.

2. Nor would the Federal Children's Bureau consent to an arrangement whereby a physician,

if he did not make five prenatal examinations (when patients did not come to him in ample time) suffer no financial deduction from the \$50.00 allocation.

Here again the Federal Children's Bureau said, "No."

Note.—Negotiations concerning this request are still being carried on.

3. In the original E.M.I.C. plan, in those cases where, in smaller communities, the attending physician must rely on his own laboratory equipment, such as x-ray, or on his own surgical skill to do, say, a Caesarean section, there would have been no extra compensation over the standard \$50.00 fee, for services so rendered by him.

However, if such attending physician had called in some other physician or specialist for such service, the extra fee would have been allowed. This did not seem fair.

The California Committee suggested, under such conditions, that an attending physician to the pregnant woman, who gave such extra service, be allowed the additional fee that would be granted to a consultant.

Here also, the Federal Children's Bureau could not see eye to eye with the California Committee, and the suggestion was disapproved.

4. The E.M.I.C. plan stipulated qualifications of specialists, emphasizing certification from a national specialty board, or eligibility to take the examinations of such a board.

The California Committee called attention to the fact that, in many rural and smaller communities, such certificated specialists are not available and made the suggestion, when such certificated consultants were not to be had, then the attending physician should be permitted to call in a local colleague, who, in private practice would have been asked in consultation, in a similar, complicated case.

To this suggestion, the Federal Children's Bureau gave approval.

5. The earlier E.M.I.C. contracts provided that when a specialist obstetrician did no pediatric work, he might call in a pediatrician to look after the infant, the pediatrician receiving pay for such service.

However, an attending physician who was giving care to the mother, and who did not desire to be responsible for the care of the infant, was not given the same privilege of calling in a pediatrician.

The California Committee recommended that the rule should be modified to permit the attending physician to have the privileges under such circumstances, similar to those given to a specialist obstetrician.

This recommendation was approved by the Children's Bureau.

6. In conjunction with the Bureau of Maternal and Child Health of the California State Board of Public Health, the California Committee submitted a simpler form of contract, in which the dangerous legal elements concerning "complete"

and "required" care were eliminated. (For discussion of this phase, brought out by Dr. William Benbow Thompson of Los Angeles, see the legal opinions printed in CALIFORNIA AND WESTERN MEDICINE, for August, on pages 114-116).

The Federal Children's Bureau agreed to delete the dangerous terms; and accepted, in part, a simpler form of contract submitted by the C.M.A. Committee.

* * *

State Board of Public Health and California Committee on Maternity-Pediatric Care Have Been Working in Coöperation.—These explanatory comments are here given, to supplement the information which appears in this issue, on pages 160-161. Also, so that members of the C.M.A. may know that the C.M.A. Committee on Maternity-Pediatric Care has been making consistent efforts to bring about an improvement in the E.M.I.C. program of the Federal Children's Bureau.

The C.M.A. Committee will welcome further suggestions from the County Society Committees now being appointed.

Physicians should keep in mind that the Federal Children's Bureau must work through a constituted State agency, as regards disbursements of Federal monies; and that the California State Board of Public Health, in turn, must pass on the Federal set-up, as submitted, to the local health officials for further coöperation.

Also, that from the beginning, the California Bureau of Maternal and Child Health has given full coöperation to the C.M.A. Committee on Maternity-Pediatric Care, in efforts to bring about improvements in the E.M.I.C. plan drafted and promulgated by the Federal Children's Bureau of the United States Department of Labor.

CALIFORNIA PHYSICIANS' SERVICE REPAYS THE LOAN OF \$35,000 FROM C.M.A.

Continued Progress of C.P.S.—Recent issues of the OFFICIAL JOURNAL have carried articles on the work of California Physicians' Service, the statewide medical service organization brought into being by the California Medical Association. A report on the "First Five Years of C.P.S." appeared in the April number, on page 191; and in the June issue, on pages 329-333, were given the minutes of the Los Angeles meeting, whereby, under the new arrangement, the members of the C.M.A. House of Delegates become a majority group of the Administrative Members of California Physicians' Service.

In the August issue, on page 51, attention was called to the present unit value of \$2.25, and the installation of a system that will make for prompt payment of statements rendered by physicians, for their professional services. Also, to the important fact that C.P.S., which did a gross business of \$1,340,315.00 last year, is now a business organization possessing assets sufficient to cover all liabilities.